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SUPPLEMENT 1 TO ATTACHMENT 3.1-A  
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
State: Vermont

CASE MANAGEMENT SERVICES (Continued)

- A. Target Group:  
Pregnant and postpartum women and infants through twelve months of age enrolled in the Vermont Department of Health, Healthy Babies Program.
- B. Areas of the State in Which Services Will be Provided:
- (x) Entire State
- ( ) Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide.)
- C. Comparability of Services:
- ( ) Services are provided in accordance with Section 1902(a)(10)(B) of the Act.
- (x) Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

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TN# 94-26  
Supersedes  
TN# None

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Effective Date: 10/1/94

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
State: Vermont

CASE MANAGEMENT SERVICES (continued)

D. Definition of Services:

Purpose - The purpose of case management is to assist individuals in gaining access to needed medical, social, educational, and other services.

Services -

Coordination/Advocacy: Facilitating the recipient's access to the services identified in the individualized care plan. The case manager may advocate on behalf of the recipient for appropriate community resources and coordinate the services as defined in the plan of care.

Monitoring: Ensuring that the recipient's individual plan of care is implemented and determining with the recipient the progress toward meeting these mutually set goals.

Evaluation: Determining whether the care plan is appropriate, whether mutually set goals have been obtained, whether a new or revised plan is necessary, or whether services should be terminated.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
State: Vermont

CASE MANAGEMENT SERVICES (Continued)

- E. Qualified Provider: Qualified case managers are those providers who, based on their education, training and experience, have been designated as such by the Agency of Human Services.
- F. Freedom of Choice: The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of Section 1902(a)(23) of the Act.
1. Eligible recipients will have free choice of the providers of case management services.
  2. Eligible recipients will have free choice of the providers of other medical care under the Plan.
- G. Duplication of Payments: Payment for case management services under the Plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
CASE MANAGEMENT SERVICES

Target Group

Children ages 1 to 5 years that are at risk for unnecessary and avoidable Medical interventions and who do not have another case management provider whose responsibility is to provide or coordinate the interventions included in this service.

B. Areas of the State in Which Services will be Provided:

(X) Entire State

C. Comparability of Services:

( ) Services are provided in accordance with Section 1902(a)(10)(B) of the Act.

(X) Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

D. Definition of Services:

Purpose - The purpose of case management is to prevent unnecessary hospitalization, inappropriate use of the emergency room, avoidable medical complications, developmental delays, or child abuse and neglect by assisting families in gaining access to needed medical, social and other support services.

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CASE MANAGEMENT SERVICES (continued)

Targeted Case Management Services -

Intake/Assessment: The child's primary care physician (PCP) may order the targeted case management services when a child is experiencing or at risk of experiencing adverse medical results such as: inappropriate use of ER/MD visits needing case management, unnecessary hospitalization, avoidable medical complications, failure to thrive, an un-managed chronic medical condition, an un-managed neurological or sensory disorder, or observable and measurable delay in one or more of the following developmental areas; cognitive, physical (includes hearing and visual), communication, social or emotional and adaptive.

Coordination/Advocacy: Facilitate the family's access to needed services, as identified in the assessment. The case manager may assist the family in acquiring the appropriate community resources and coordinate needed services.

Monitoring: Case managers will ensure that services for the family are implemented and will determine with the family, the progress toward meeting mutually set goals. If more than 20 visits are considered necessary to meet these goals, case review and prior authorization by the Vermont Dept. of Health is required.

Evaluation: Determining whether services are appropriate, whether mutually set goals have been obtained, whether a new or revised assessment of needs is necessary or whether services should be terminated.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Vermont

CASE MANAGEMENT SERVICES(Continued)

E. Qualified Provider: Those providers who, based on their education, training and experience, have been designated as such by the Agency of Human Services.

F. Freedom of Choice: The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of Section 1902(a)(23) of the Act.

1. Eligible recipients will have free choice of the providers of case management services.
2. Eligible recipients will have free choice of the providers of other medical care under the plan.

G. Duplication of Payments: Payment for the case management services under the Plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

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